This Page Is Inserted by IFW Operations and is not a part of the Official Record

BEST AVAILABLE IMAGES

Defective images within this document are accurate representations of the original documents submitted by the applicant.

Defects in the images may include (but are not limited to):

- BLACK BORDERS
 - TEXT CUT OFF AT TOP, BOTTOM OR SIDES
 - FADED TEXT
 - ILLEGIBLE TEXT
 - SKEWED/SLANTED IMAGES
 - COLORED PHOTOS
 - BLACK OR VERY BLACK AND WHITE DARK PHOTOS
 - GRAY SCALE DOCUMENTS

IMAGES ARE BEST AVAILABLE COPY.

As rescanning documents will not correct images, please do not report the images to the Image Problem Mailbox.



DECLARATION FOR UTILITY OR

AMKOR-022CB

Sean T. Crowley

PTO/SB/01 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Attorney Docket Number

First Nam d Inventor

DESIGN	First Nam d Invento	r Sean I. Crowley						
PATENT APPLICATION	COMPL	ETE IF KNOWN						
(37 CFR 1.63)	Application Number							
X Declaration Declaration	Filing Date	Herewith						
Submitted OR Submitted after Initial Filing (surcharge	Art Unit							
Filing (37 CFR 1.16 (e)) required)	Examiner Name							
As the below named inventor, I hereby declare that:								
My residence, mailing address, and citizenship are as stated below next to my name.								
I believe I am the original and first inventor of the subject matter	which is claimed and for whi	ch a patent is sought on the invention entitled:						
METHODS OF MAKING THIN INTEG		1 1						
IMPROVED THERMAL PERFORM	MANCE AND INCR	EASED I/O DENSITY						
·								
(Title of the	Invention)							
the specification of which								
X is attached hereto								
OR	· ·							
was filed on (MM/DD/YYYY) as United States Application Number or PCT International								
· ·		,						
Andication Number	ded on (MM/PD00000)							
Application Number and was amend	ded on (MM/DD/YYYY)	(if applicable).						
I hereby state that I have reviewed and understand the contents any amendment specifically referred to above.	of the above identified speci	fication, including the claims, as amended by						
I acknowledge the duty to disclose information which is material to	o patentability as defined in	37 CFR 1.56, including for continuation-in-part						
applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.								
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United								
States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.								
Prior Foreign Application Number(s) Country	Foreign Filing Date (MM/DD/YYYY)	Priority Certifled Copy Attached? Not Claimed YES NO						
The second secon								
,								
Additional foreign application numbers are listed on a suppl	 emental priority data sheet	PTO/SR/02B attached hereto:						
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:								

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please	type	a	plus	sign	(+)	inside	this	box	→	+
	• •		•	•	٠.					

PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if a	ny:		A petition has been filed	d for t	his unsigned inventor	
Given Name (first and middle [if any])			Family Name or Surname			
Robert F.		Darveaux				
Inventor's Signature) .		Date 10/2/03	
Residence: City Higley	State AZ		Country U.S.A.		Citizenship U.S.A.	
Malling Address 4297 E. Melody Drive				 .		
Mailing Address						
City Higley	State AZ		ZIP 85236 C	ountr	y U.S.A.	
Name of Additional Joint Inventor, if ar	ıy:		A petition has been filed	for thi	s unsigned inventor	
Given Name (first and middle [if any])		Family Name	or S	umame	
James M.		F	⁷ usaro			
Inventor's Signature Law June 10			Date 9/19/03			
Residence: City Scottsdale	State AZ		Country U.S.A.		Citizenship U.S.A.	
Malling Address 13449 N. 76th Street						
Mailing Address						
City Scottsdale	StateAZ		ZIP 85260	Cour	ntry U.S.A.	
Name of Additional Joint Inventor, if ar	ıy:		A petition has been filed fo			
Given Name (first and middle [if any])		Family Name or Surname				
		·				
Inventor's Signature		<u> </u>			Date	
Residence: City	State		Country		Citizenship	
Mailing Address						
Mailing Address						
City	State		ZIP ·	<u> </u>	unter	

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/01 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all collescondence to 1 V i	ect all correspondence to: X Customer Number or Bar Code Label 007663 OR Correspondence addr					
Mark B. Garred Name STETINA BRUNDA GARRED & BRUCKER						
Address						
City		State		ZIP		
Country	Telephone			Fax		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENTOR:	A petition	has been filed	for this unsign	ned inventor		
Given Name (first and middle [if any]) Sean T.		Family Name or Surname	Crowley			
Inventor's Signature Sun Add	ealle			Date 9/18/03		
Residence: City Phoenix	State AZ	Count	yU.S.A.	Citizenship U.S.A.		
Malling Address 826 E. Desert Trumpet						
сну Phoenix	State AZ	ZIP 8	5048	Country U.S.A.		
NAME OF SECOND INVENTOR:	A petition ha	as been filed fo	or this unsigne	d inventor		
Given Name (first and middle [if any]) Barry M. Family Name or Surname Miles						
Inventor's Signature				Date		
Residence: City Chandler	State AZ	Countr	y U.S.A.	Citizenship U.S.A.		
1811 West Azalea Drive Malling Address						
City Chandler	State AZ	ZIP 85		Country U.S.A.		
Additional inventors are being named on the	_supplemental Additi	onal Inventor(s) s	heet(s) PTO/SB/02	2A attached hereto.		

PTO/SB/01 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Utility or Design Patent Application

Direct all correspondence to: X Customer No or Bar Code		07663	OR	Cor	respondence address below		
Mark B. Garred Name STETINA BRUNDA GARRED & BRUCKER							
Address							
City		State			ZIP		
Country	Telephone	·			Fax		
made are punishable by fine or imprisonment or bot	I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENTOR:	A petition	has been fi	led for th	is unsigr	ned inventor		
Given Name (first and middle [if any]) Sean T.		Family Na or Surnam		vley			
Inventor's Signature					Date		
Residence: City Phoenix	State AZ	Cou	untry U.S	.A.	Citizenship U.S.A.		
Mailing Address 826 E. Desert Trumpet							
City Phoenix	State AZ		85048		Country U.S.A.		
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor Given Name							
(first and middle [if any]) Barry M. Family Name or Surname Miles							
Inventor's Signature					Date 10/2/03		
Residence: City Chandler	State AZ	Cou	ntry U.S	.A.	Citizenship U.S.A.		
1811 West Azalea Drive Mailing Address							
City Chandler	State AZ		85248		Country U.S.A.		
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							

PTO/SB/96 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Indeed the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

STATEMENT UNDER 37 CFR 3.73(b)

Applicant/Patent Owner: Sean T. Crowley et al.

Applicat	ion No./Patent No.:		Filed/Issue Date:
Entitled	METHODS OF MAKING TH	IN INTEGRATED CIRCUIT I	DEVICE PACKAGES WITH IMPROVED THERMAL PERFORMANCE
Amkor	Technology, Inc.	a	Delaware Corporation
	(Name of Assignee)	(Type of /	Assignee, e.g. corporation, partnership, university, government agency, etc.)
-4-4 41	A *A *		·
states th			
·	e assignee of the entire		
T	n assignee of less than he extent (by, percentag	ge) of its ownership int	terest is%
in the pa	atent application/patent	identified above by vir	tue of either:
W	n assignment from the last recorded in the Unite hich a copy thereof is a	ed States Patent and	ent application/patent identified above. The assignment Trademark Office at Reel Frame or for
OR			
	chain of title from the in ssignee as shown below		nt application/patent identified above, to the current
	1. From:		_То:
	The document was	recorded in the United	d States Patent and Trademark Office at
	•		, or for which a copy thereof is attached.
			_To: d States Patent and Trademark Office at
			, or for which a copy thereof is attached.
	3. From:		_To:
	The document was Reel	recorded in the United _, Frame	d States Patent and Trademark Office at, or for which a copy thereof is attached.
	[] Additional documer	nts in the chain of title	are listed on a supplemental sheet.
[NOT must	E: A separate copy (i.e.	., the original assignment ment Division in accor	chain of title are attached. ent document or a true copy of the original document) dance with 37 CFR Part 3, if the assignment is to be 302.08]
The unde	rsigned (whose title is s	supplied below) is auth	orized to act on behalf of the assignee.
	9/19/03		Paul W. Davis
_	Date		Typed or printed name/
			Signature Director of Intellectual Property

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

JAN 0 2 2004 & JAN 0

PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	Unknown
Filing Date	Herewith
First Named Inventor	Sean T. Crowley
Title	Methods of Making Thin
Group Art Unit	Unknown
Examiner Name	Unknown
Attorney Docket Number	AMKOR-022CB

I hereby appoint:						
X Practitioners at 6 OR Practitioner(s) na	Customer Number 007663	Place Customer Number Bar Code Label here				
	Name Registration Number					
1	·					
<u> </u>						
as my/our attomey(s) or	r agent(s) to prosecute the application ide	entified above, and to transact all				
business in the United S	tates Patent and Trademark Office connec	ted therewith.				
	espondence address for the above-identif					
	ned Customer Number.	,				
OR		Place Customer				
Practitioners at Cus	stomer Number	Number Bar Code				
OR		Label here				
Firm or Individual Name						
Address						
Address						
City		State Zip				
Country						
Telephone	F	ax				
Lamthe:						
	_					
Applicant/Invento	Applicant/Inventor.					
X Assignee of record of the entire interest. See 37 CFR 3.71.						
X Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).						
The state of the s						
SIGNATURE of Applicant or Assignee of Record						
Name Paul M. Davis						
Signature and (1) and						
Date						
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple						
torms it more than one signature	is required, see below*.	a dien representative(s) ale required. Submit multiple				
Total offor	☐ *Total offorms are submitted.					

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will very depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.